Washington St	tate Records Ce	enter Box Trans	mittal	Will you be delivering/mailing the boxes to the Records Center Yes No						
AGENCY NO.	OFFICE NO.	OFFICE NO. AGENCY AND OFFICE NAME			DATE PREPARED	D PAGE NO. RECORDS		CENTER USE ONLY		
OFFICE LOCATIO	N (STREET ADDRES	S, FLOOR, AND RO	OM NUMBER)							
PREPARER'S NAME, TELEPHONE, AND MAILSTOP				RECORDS OFFICER INITIAL AND MAILSTOP						
ENTER A MAXIM	IUM OF THREE DA	ANs PER BOX. TH	IE RECORDS IN A	A SINGLE BOX MUST E	BE DUE FOR DISPOSAL AT	THE SAME TIME.				
PLACE BARCODE LABEL HERE						TITLE (MUST MATCH WORDING ON RETENTION SCHEDULE)			INCLUSIVE DATES	
ENTER RECORDS CENTER BOX BARCODE NUMBER HERE AGENCY BOX NO.			IF THE BOX CONTAINS A SINGLE SERIES SHOW DETAIL OF CONTENTS			RECORDS CENTER COMMENTS				
PLACE BARCODE LABEL HERE				DISPOSITION AUTHORITY NO.	SERIES TITLE (MUST MATCH WORI	DING ON RETENTION SCI	L HEDULE)	CUTOFF DATE	INCLUSIVE DATES	
ENTER RECORDS CENTER BOX BARCODE NUMBER HERE AGENCY BOX NO.			IF THE BOX CONTAINS A SINGLE SERIES SHOW DETAIL OF CONTENTS			RECORDS CENTER COMMENTS				
PLACE BARCODE LABEL HERE				DISPOSITION AUTHORITY NO.	SERIES TITLE (MUST MATCH WORI	TLE (MUST MATCH WORDING ON RETENTION SCHEDULE)			INCLUSIVE DATES	
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ENTER RECORDS CENTER BOX BARCODE NUMBER HERE AGENCY BOX NO.				IF THE BOX CONTAINS A SINGLE SERIES SHOW DETAIL OF CONTENTS F			RECORDS	RECORDS CENTER COMMENTS		